FORM D

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

| RECI | S.a.C. |
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| Name of Offering (☐ check if this is Private Placement of Limited Partnership Is | | nas changed, and indicate change.) ital Offshore Partners, L.P. | | |
|---|---|---|---|------------------------|
| Filing Under (Check box(es) that apply): Type of Filing: New Filing | | | ULOE | |
| Type of Thing. | | ASIC IDENTIFICATION DATA | | |
| 1. Enter the information requested about th | | ASIC IDENTIFICATION DATA | 06027 | 7307 |
| Name of Issuer (☐ check if this is | an amendment and name b | nas changed, and indicate change.) | | , |
| Hayman Capital Offshore Partners, Address of Executive Offices 2626 Cole Avenue, Suite 200, | (No. and Street, City, Sta Dallas, Texas 75204 | ate, Zip Code) | Telephone Number (Includi (214) 347-8050 | ng Area Code) |
| Address of Principal Business Operations (if different from Executive Offices) | (No. and Street, City, Str | ate, Zip Code) Telephone Nun | mber (Including Area Code) | |
| Brief Description of Business Investment Partnership | | | | |
| Type of Business Organization corporation business trust | | limited partnership, already formed limited partnership, to be formed | | other (please specify) |
| Actual or Estimated Date of Incorporation | n or Organization: | Month 0 2 | Year 0 6 ⊠ Actual | ☐ Estimated |
| Jurisdiction of Incorporation or Organizat | | Postal Service abbreviation for State: F N for other foreign jurisdiction) | ⁷ N | |

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number

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Page 1 of 9

| | | | A. BASIC IDENTIF | ICATION DATA | | |
|--|-----------------------|---------------------------------------|--|--------------------------------|---------------------|--------------------------------------|
| 2. Enter the infe | ormation | requested for the fo | ollowing: | | | |
| Each benefic issuer; | ial owner | having the power | has been organized within the p to vote or dispose, or direct the | vote or disposition of, 10% or | | • • |
| Each executi Each general | ve officer and man | and director of coaging partner of pa | rporate issuers and of corporate ortnership issuers. | general and managing partner | s of partnership is | ssuers; and |
| Check Box(es) the | at Apply: | ☐ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | ☑ General and/or Managing Partner |
| Full Name (Last r. | | , if individual) ement, Inc., Gene | ral Partner | | | |
| Business or Resid | ence Add | ress (Number and 00, Dallas, Texas | Street, City, State, Zip Code) | | | |
| Check Box(es) the | | Promoter | ☐ Beneficial Owner | Executive Officer | ☑ Director | ☐ General and/or Managing Partner |
| Full Name (Last r. | | , if individual) the General Parts | nere | | | |
| Business or Resid | ence Add | ress (Number and 00, Dallas, Texas | Street, City, State, Zip Code) | | | |
| Check Box(es) the | | | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | ☐ General and/or Managing Partner |
| Full Name (Last r | name first, | if individual) | | | | |
| Business or Resid | ence Add | ress (Number and | Street, City, State, Zip Code) | | | |
| Check Box(es) the | at Apply: | Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | ☐ General and/or Managing Partner |
| Full Name (Last r | ame first, | , if individual) | | | | |
| Business or Resid | lence Add | ress (Number and | Street, City, State, Zip Code) | | | |
| Check Box(es) the | at Apply: | ☐ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | ☐ General and/or Managing Partner |
| Full Name (Last r | name first | , if individual) | | | | |
| Business or Resid | ence Add | ress (Number and | Street, City, State, Zip Code) | | | |
| Check Box(es) the | at Apply: | Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | ☐ General and/or Managing Partner |
| Full Name (Last r | name first | , if individual) | | | | |
| Business or Resid | lence Add | ress (Number and | Street, City, State, Zip Code) | | | |
| Check Box(es) th | at Apply: | ☐ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | General and/or Managing Partner |
| Full Name (Last r | name first | , if individual) | | | | |
| Business or Resid | lence Add | ress (Number and | Street, City, State, Zip Code) | | | |
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|-------------|---|--------------|--------------|--------------|--------------|--------------|-------------|--------------|--------------|--------------|--------------|---|----------------|------------|
| 1. | Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual? | | | | | | | | | | ng? | Yes □ | No ⊠ | |
| 2. | What is th | e minim | um inve | stment ti | hat will l | be accep | ted fron | n any ind | dividual | ? | | | \$ <u>2,00</u> | 00,000.00 |
| 3. | Does the o | offering p | permit jo | int own | ership of | f a single | e unit: | | | | | | Yes ⊠ | No □ |
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| Full 1 | Vame (Las | st name f | first, if in | dividua | 1) | | | | | | | | | |
| Busir | ess or Re | sidence . | Address | (Numbe | r and St | reet, Cit | y, State, | Zip Coo | ie) | | | | | |
| Name | of Assoc | iated Br | oker or I | Dealer | | | | | | | | | | |
| | in Which | | | | | | | | | | | | | |
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| [MT [RI] | | [NV] [SD] | [NH] [TN] | [NJ] [TX] | (NM) [UT] | [NY] [VT] | [NC] | [ND] [WA] | (OH) [WV] | [OK] [WI] | [OR] [WY] | [PA] [PR] | | • |
| | | | | | | [11] | [77] | [WA] | [""] | [[[] | [(, ,] | [[[| | |
| rulli | Name (Las | i name i | ırsı, ii ir | idividua | 1) | | | | | | | | | |
| Busin | ess or Re | sidence / | Address | (Numbe | r and St | reet, Cit | y, State, | Zip Coo | le) | | | | | |
| Name | of Assoc | iated Bro | oker or I | Dealer | | | | | | | | | | |
| | in Which | | | | | | | | | | | | | All States |
| [AL | | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] | | An States |
| (IL) | | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] | | |
| [MT | | [NV] | [NH] | [NJ] | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] | | |
| [RI | [SC] | [SD] | [TN] | [TX] | [UT] | [VT] | [VA] | [WA] | [WV] | [WI] | [WY] | [PR] | | |
| Full ! | Name (Las | st name f | first, if ir | idividua | l) | | _ | | | | | | | |
| Busir | ess or Re | sidence . | Address | (Numbe | r and St | reet, Cit | y, State, | Zip Coo | ie) | | | | | |
| Name | of Assoc | iated Br | oker or I | Dealer | | | | | | | | *** | | |
| States | in Which | Person | Listed F | las Solic | ited or I | ntends t | o Solici | Purcha | sers | | | | | <u> </u> |
| | | | | | | | | | | ************ | ••••• | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | All States |
| [AL |] [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] | | |
| [IL] | | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] | | |
| [MT |] [NE] | [NV] | [NH] | [NJ] | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] | | |
| [RI] | [SC] | [SD] | [TN] | [TX] | [UT] | (VT) | [VA] | [WA] | [WV] | [WI] | [WY] | (PR) | | |
| | | | | | hlank a | | | , | | | 211 1 | ant as necessary) | | |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box of and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Aggregate Amount Already Offering Price Sold Debt Equity ☐ Common ☐ Preferred Convertible Securities (including warrants). Partnership Interests.... 4,400,000.00 4,400,000.00)..... 0 Other (Specify Ω Total \$ 4,400,000.00 4,400,000.00 Answer also in Appendix, Column 3, if filing under ULOE Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "none" or "zero." Number Aggregate Investors Dollar Amount of Purchases 4,400,000.00 Accredited Investors Non-accredited Investors 0 0 Total (for filings under Rule 504 only) N/A N/A Answer also in Appendix, Column 4, if filing under ULOE 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all

| */F = = * * · · · · · · · · · · · · · · · · | pe of curity | D | ollar Amou Sold |
|--|-----------------|----------------------------------|--------------------|
| Rule 505 | Α | . \$ | N/A |
| Regulation A <u>N/</u> | <u> </u> | . \$ | N/A |
| Rule 504 | Α | _ \$ | N/A |
| Total | Α | _ \$ | N/A |
| a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees | 🗆 | \$ | 0 |
| this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees | | \$ \$_ | 0 |
| this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | 🗆 | \$ \$ \$ | 0 0 5,000 |
| this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees. Printing and Engraving Costs. Legal Fees. Accounting Fees. | 🗆 🗵 | \$ \$ \$ \$ | |
| this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees. Printing and Engraving Costs | 🗆 🗵 | \$ \$ \$ \$ | 5,000 |
| this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees Sales Commissions (specify finder's fees separately) | 🖂 🖂 | \$ \$ \$ \$ \$ | 5,000 |
| this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees. Printing and Engraving Costs. Legal Fees. Accounting Fees. Engineering Fees. | 🖂 🖂 | \$ \$ \$ \$ \$ \$ | 5,000 0 0 |

| b. Enter the difference between the aggregate offering price given in response to Part C-Question I and total expenses furnished in response to Part C-Question 4.a. This difference is the "adjusted gross proceeds to the issuer." | | \$ <u>4,395,000.00</u> |
|---|--|--|
| 5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C-Question 4.b. above. | | |
| | Payments to Officers, Directors, & Affiliates | Payments To Others |
| Salaries and fees | \$□ | \$ |
| Purchase of real estate | \$□ | \$ |
| Purchase, rental or leasing and installation of machinery and equipment | \$□ | \$ |
| Construction or leasing of plant buildings and facilities | \$□ | \$ |
| Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) \Box | \$ | \$ |
| Repayment of indebtedness | \$□ | \$ |
| Working capital | \$□ | \$ |
| Other (specify) (investments) | \$⊠ | \$ <u>4,395,000.00</u> |
| Column Totals | \$ ⊠ | \$ <u>4,395,000.00</u> |
| Total Payments Listed (column totals added) | \$ <u>4</u> . | 395,000.00 |
| D. FEDERAL SIGNATURE | | |
| The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, information furnished by the issuer to any non-accredited investor pursuant to paragraph (b) (2) of Rule 502. | filed under Rule : upon written requ | 505, the following est of its staff, the |
| Issuer (Print or Type) Hayman Capital Offshore Partners, L.P. Signature March | , 2006 | |
| Name of Signer (Print or Type) Title of Signer (Print or Type) | | |
| J. Kyle Bass Director of Hayman Offshore Management, Inc., General I | artner | |
| | | |
| ATTENTION Intentional misstatements or omissions of fact constitute federal criminal violation | s. (See 18 U.S.) | C. 1001). |

| | | E. STATE SIGNATURE | | | | | | | |
|------|--|--|------------------------|----------------|---------|--|--|--|--|
| ī. | rule? | resently subject to any of the disqualification prov x, Column 5, for state response. | | Yes | No ⊠ | | | | |
| 2. | The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law. | | | | | | | | |
| 3. | The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees. | | | | | | | | |
| 4. | 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied. | | | | | | | | |
| | e issuer has read this notification and knows t dersigned duly authorized person. | he contents to be true and has duly caused this not | ice to be signed on it | s behalf by th | e | | | | |
| | Issuer (Print or Type) Hayman Capital Offshore Partners, L.P Signature March, 2006 | | | | | | | | |
| Na | Name of Signer (Print or Type) Title of Signer (Print or Type) | | | | | | | | |
| J. I | Cyle Bass | Director of Hayman Offshore Management, Inc. | , General Partner | | | | | | |

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

| 1 | 2 | | 3 | | 4 | | | 5 |
|-------|------------------------------|---|--|--|----------------------|----------|--|---|
| | non-acci investor (Par | to sell to credited s in State rt B- n 1) | Type of security and aggregate offering price offered in state (Part C- Item 1) | Type of investor and amount purchased in State (Part C-Item 2) | | | Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | |
| State | Yes | No | Limited Partnership Interests | Number of Accredited Investors | ccredited Accredited | | | |
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APPENDIX

| 1 | | 2 | 3 | · · · · · · · · · · · · · · · · · · · | 4 | | | 5 |
|-------|------------------------------|---|--|---------------------------------------|--|---|--|---|
| | non-acc investors (Par | to sell to credited s in State rt B- n 1) | Type of security and aggregate offering price offered in state (Part C- Item 1) | Туре | Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | | | |
| State | Yes | No | Limited Partnership Interests | Partnership Accredited Accredited | | | | |
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Page 9 of 9

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